



# SECRETARY OF THE COMMONWEALTH

## FINANCIAL DISCLOSURE STATEMENT

Members of certain boards of state and local government are required to file this Financial Disclosure Statement as a condition of assuming office and, then, annually while serving as an officeholder.

You must complete this form. Attached additional pages when necessary. **You must sign and date this form upon completion.**

The annual filing deadline is January 15<sup>th</sup>.

**For State Board Members:** If you have recently been appointed or reappointed, you must file this form with the Secretary of the Commonwealth prior to attending your first meeting.

**For Local Board Members:** If you have recently been appointed or reappointed, you must file this form with the Clerk of the appropriate governing body prior to attending your first meeting.

As an annual filing, this form constitutes a report of financial interests for the calendar year beginning January 1 and ending December 31. As a condition for assuming an office, this form constitutes a report of financial interests at the time of filing.

The information required on this form must be provided on the basis of the best knowledge, information and belief of the individual filing the form as of the date of this report unless otherwise stated.

**This Financial Disclosure Statement is open for public inspection.**

## DEFINITIONS AND EXPLANATORY MATERIAL.

**“Business”** means a corporation, partnership, sole proprietorship, firm, enterprise, franchise, association, trust or foundation, or any other individual or entity carrying on a business or profession, whether or not for profit.

**“Immediate family”** means (z) a spouse and (zz) any other person residing in the same household as the filer, who is a dependent of the filer or of whom the filer is a dependent.

**“Dependent”** means any person, whether or not related by blood or marriage, who receives from the filer, or provides to the filer, more than one-half of his financial support.

**“Personal interest”** means, for the purposes of this form only, a personal and financial benefit or liability accruing to a filer or a member of his immediate family. Such interest shall exist by reason of (z) ownership in real or personal property, tangible or intangible; (zz) ownership in a business; (zzz) income from a business; or (zv) personal liability on behalf of a business; however, unless the ownership interest in a business exceeds three percent of the total equity of the business, or the liability on behalf of a business exceeds three percent of the total assets of the business, or the annual income, and/or property or use of such property, from the business exceeds \$10,000 or may reasonably be anticipated to exceed \$10,000, such interest shall not constitute a “personal interest.”

## INSTRUCTIONS FOR COMPLETING THIS FORM

Except for real estate located within the county, city or town in which the officer or employee serves or a county, city or town contiguous to the county, city or town in which the officer or employee serves, officers and employees of local governmental or advisory agencies shall not be required to disclose under Part I of the form any other interest in real estate.

Include all forms of personal interests held by you or members of your immediate family at the time of filing; real estate, stocks, bonds, equity interests in proprietorships and partnerships. You may exclude:

1. Deposits and interest bearing accounts in banks, savings institutions and other institutions accepting such deposits or accounts;
2. Interests in any business, other than a news medium, representing less than three percent of the total equity value of the business;
3. Liability on behalf of any business representing less than three percent of the total assets of such business; and
4. Income (other than from salary) less than \$10,000 annually from any business. You need

not state the value of any interest. You must state the name or principal business activity of each business in which you have a personal interest.

## Section II, Offices, Directorships and Salaried

**Employments.** The paid offices, paid directorships and salaried employments which I hold or which members of my immediate family hold, and the businesses from which I, or members of my immediate family receive retirement benefits are as follows: (You need not state any dollar amounts.)

## Section III, Businesses To Which Services Were Furnished.

The provisions of Part III A and B of the disclosure form prescribed by this section shall not be applicable to officers and employees of local governmental and local advisory agencies.

**Part A:** List those businesses that you represented before any state government agency, during the proceeding year, for which total compensation received was in excess of \$1,000. Identify the business and state governmental agencies by name. Note: You may exclude representation before any court or judge, compensation for other services to such businesses, and representation consisting solely of the filing of mandatory papers.

**Part B:** List those businesses which, to your knowledge, have been represented during the preceding year before any state governmental agency, by persons with whom you have a close financial association, or which total compensation received was in excess of \$1,000. Identify the businesses and state governmental agencies by name. Note: You may exclude representation before any court or judge, compensation for other services to such business, and representation consisting solely of the filing of mandatory papers.

**Part C:** Check each category of business to which services were furnished during the preceding year for which total compensation received was in excess of \$1,000.

**Section IV, Compensation for Expenses.** List persons, associations or other sources (other than your governmental agency) for which you or a member of your immediate family received remuneration in excess of \$200 during the preceding year. Remuneration may have been in cash or otherwise, as honorariums, or payments of expenses in connection with your attendance of any meeting, conference, seminar or other function to which you were invited in your official capacity. Name the source, described the occasion, and state the amount of remuneration for each occasion.

Name
Name of Board, Commission, or Office Held
Contact Address

## I. FINANCIAL INTERESTS

### A. My personal interests are:

Residence Address
Other real estate address, or if no address, location
Name or principal business activity of each business in which stock, bond or equity interest is held

### B. The personal interests of my immediate family are:

Real estate, address, or if no address, location
Name or principal business activity of each business in which stock, bond or equity interest is held

## II. OFFICES, DIRECTORSHIPS AND SALARIED EMPLOYMENTS

### A. My paid offices paid directorships and salaried employments are:

Position Held	Name of Business
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### B. The paid offices, paid directorships and salaried employments of members of my immediate family are:

Position Held	Name of Business
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## III. BUSINESS TO WHICH SERVICES WERE FURNISHED

- A. The businesses I have represented before any state governmental agency, excluding any court or judge, for which I have received total compensation in excess of \$1,000 during the preceding year, excluding compensation for other services to such businesses and representation consisting solely of the filing of mandatory papers, are as follows:

Identify businesses by name and name the state governmental agencies before which you appeared on behalf of such business

NAME OF BUSINESS	NAME OF GOVERNMENTAL AGENCY

- B. The businesses that, to my knowledge, have been represented before any state governmental agency, excluding any court or judge, by persons with whom I have a close financial association and who received total compensation in excess of \$1,000 during the preceding year, excluding compensation for other services to such businesses and representation consisting solely of the filing of mandatory papers, are as follows:

Identify businesses by type and name the state governmental agencies before which such person appeared on behalf of such businesses.

TYPE OF BUSINESS	NAME OF GOVERNMENTAL AGENCY

C. All other businesses listed below that operate in Virginia to which services were furnished and for which total compensation in excess of \$1,000 was received during the preceding year:

Check each category of business to which services were furnished.

Electronic utilities		Banks		Retail companies	
Gas utilities		Savings institutions		Beer, wine or liquor companies or distributors	
Telephone utilities		Loan or finance companies		Trade associations	
Water utilities		Manufacturing companies (state type of product, e.g., textile, furnitures, etc.)		Professional associations	
Cable television companies		Mining companies		Associations of public employees or officials	
Intrastate transportation companies		Life insurance companies		Counties, cities or towns	
Interstate transportation companies		Casualty insurance companies		Labor organizations	
Oil or gas retail companies		Other insurance companies			

#### IV. COMPENSATION FOR EXPENSES

The person, associations, or other sources other than my governmental agency from which I or a member of my immediate family received remuneration in excess of \$200 during the preceding year, in cash or otherwise, as honorariums or payment of expenses in connection with my attendance at any meeting or other function to which I was invited in my official capacity are as follows:

DESCRIPTION	AMOUNT OF REMUNERATION	DESCRIPTION OF OCCASION

*I swear or affirm that the foregoing information is full, true and correct to the best of my knowledge.*

Signature \_\_\_\_\_ Date \_\_\_\_\_